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Please type a plus sign (+) inside UTILITY

PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.	ETH1600	26
First Inventor	Kevin Cooper	003
Title	Two Phase Thermaly Deformable Biocom Polymer Matrix For Use In Medical Device	
Express Mail Label No.	EL691435482US	

(only for new nonprovisional applications under 37 CFR 1 53(b))

APPLICATION ELEMENTS

ADDRESS TO: Commissioner for Patents **Box Patent Application**

Washington, DC 20231

See MPEP Chapter 600 concerning utility patent application contents 1. X Fee Transmittal Form (e.g., PTO/SB/17)

- (submit an original and a duplicate for fee processing)
- 2. Applicant claims small entity status.
- 3. Specification [Total Pages 29] (Preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- 4. Formal Drawing(s)(35 USC 113) [Total Sheets 11
- 5. Oath or Declaration [Total Pages
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)

Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

- 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. Computer Readable Form (CRF)
- b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or

 - ii. 🔲 paper
- c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- Assignment Papers (cover sheet & document(s))
- 10. 37 CFR 3.73(b) Statement Power of Attorney (when there is an assignee)
- 11. English Translation Document (if applicable)
- 12. Information Disclosure Statement
- (IDS)/PTO-1449 Copies of IDS

Citations

- 13. Preliminary Amendment
- 14 X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 15. Certified Copy of Priority Document(s)
- (if foreign priority is claimed) 16. Request and Certifications under 35 U.S.C. 122
- (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- 17. Other

6. Application Data Sheet. See 37 CFR 1.76

18. X If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76.

☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: 09/055,342, filed 4/6/98. Prior application information: Examiner P. Short, Group Art Unit: 1712 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an

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oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19 PLEASE CANCEL CLAIMS 1-20.

20. CORRESPONDENCE ADDRESS

□ Customer Number or Bar Code Label 000027777 or □ Correspondence Address below

One Johnson & Johnson Plaza Name: Philip S. Johnson, Esq. New Brunswick, NJ 08933-7003 USA Johnson & Johnson Address:

21. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to William K. Wissing at:

(732) 524-6201 Fax: (732) 524-2808 Telephone:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Reg. No. 34757 William K. Wissing NAME

SIGNATURE

DATE October 16, 2001

FEE TRANSMITTAL Application Number Filing Date October 16, 2001 First Named Inventor Group Art Unit Examiner Name Attorney Docket Number ETH1600

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)		(3)	(4)	(5)
FOR:	NUMBER F	FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	5 - 20 =		0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	1 - 3 =		0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS			N/A	\$270.00	
			TOTAL FEES	\$ 710.00	

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/ETH1600/WKW in the amount of \$710.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ETH1600/WKW. Three copies of this sheet are enclosed.

SUBMITTED BY:			Complete (if applicable)
Typed or Printed Name	William K. Wissing		Reg. No. 34,757
Signature	lut Ili	Date: 10/16/2001	Deposit Account No. 10-0750



10-12-61

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kevin Cooper

For : Two Phase Thermally Deformable Biocompatible

Absorbable Polymer Matrix For Use In Medical

Devices

Express Mail Certificate

"Express Mail" mailing number: EL691435482US

Date of Deposit:

October 16, 2001

I hereby certify that this complete Divisional Application, including copy of Specification pages, Claims, Preliminary Amendment, Formal Drawing, copy of Declaration and Power of Attorney, Information Disclosure Statement with Form 1449, and Petition For Acceptance Of Photographs is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

Crystal Washington

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee